
SBE SELF-CERTIFICATION APPLICATION INSTRUCTIONS

Complete entire Self Certification Application in black or blue ink pen. By completing the attached application, you will be certified for bidding **contracts \$50,000 or less in dollar value**. For bids over \$50,000 you will need to complete the business certification application available on the internet at www.cincinnati-oh.gov, or request an application from the Small Business Division at 352-3971. All businesses **must** have a fixed office in Hamilton County.

LOCATING YOUR SIZE STANDARD

SIZE STANDARD VERIFICATION

1. Look up www.sba.gov on internet
2. At the top of the Home Page on the left column under Hot Items select **NAICS Definitions**, click go
3. Scroll down to Search for: **Select 2002 NAICS and Sic Codes**
4. Go to the description area second box, **put in your business type (.e. computer, construction) go to Sort Order and select Sort by SIC or NAICS, click search.**
5. Scroll down and review descriptions for your company service type
6. Under third column, select SIC Code and enter the **SIC/NAICS Code** for your business service where indicated on page 2 of Self-Certification Application
7. Review column two for your **Size Standard** not to exceed for either gross revenue or number of employees and follow instructions as indicated below

If next to your SIC Code your company is to reflect Gross Revenue then proceed to the next direction. If not Skip to 12.

8. Take your company's gross revenue for the past 3-years and divide by (3)
9. Enter the three year average where indicated on page two of the application and initial
10. Proceed to "My Bonding Range" (If applicable place dollar amount here and initial
11. Enter the net worth of all principal owners where indicated and initial
Proceed to Oath and Affirmation Statement sign and notarize as indicated on application

If next to your SIC Code your company is to reflect Number of Employees then proceed to 12

12. Take your total number of employees for the past 3-years and divide by three (3) and initial
13. Enter the three year average for employees where indicated on page two of application and initial
14. Proceed to "My Bonding Range" (If applicable) place dollar amount here and initial
15. Enter the net worth of all principal owners and initial
16. Proceed to Oath and Affirmation Statement sign and notarize as indicated on application

APPLICATION SUBMITTAL

1. Please submit the completed application and any required documents to:

**City of Cincinnati – Small Business Enterprise Program
Department of Finance-Division of Purchasing
Two Centennial Plaza
805 Central Avenue - Suite 234
Cincinnati, Ohio 45202**

2. For assistance in completing this application contact us at 513-352-3154
3. If you have not completed a Vendor Registration Application with the City call 352-3209.

Office of Contract Compliance Division reserves the right to request additional information when needed.



For Official Use Only
☐ Revenue
☐ Employees

SMALL BUSINESS ENTERPRISE SELF-CERTIFICATION APPLICATION/AFFIDAVIT

Self-Certification Application for Bidders of Awards \$50,000 or less only

Name of Company	Federal Tax ID#.	# of Yrs in Present Business		
Fixed Business Address	City	State	Zip	County
E-Mail Address	Business Phone #	Fax #		
Owners Ethnic/Gender information: <input type="checkbox"/> African American <input type="checkbox"/> Asian <input type="checkbox"/> Hispanic <input type="checkbox"/> Native Indian <input type="checkbox"/> Caucasian <input type="checkbox"/> Male <input type="checkbox"/> Female Are you a United States Citizen <input type="checkbox"/> Yes <input type="checkbox"/> No				
Owner/Principal Name	Title	Contact Person Y <input type="checkbox"/> N <input type="checkbox"/>		
Owner/Principal Name	Title	Contact Person Y <input type="checkbox"/> N <input type="checkbox"/>		

Type Of Business: ☐ Construction ☐ Professional ☐ Services ☐ Supplier
* If a Supplier please check the following type: ☐ Broker ☐ Distributor ☐ Manufacturer's Representative

Description of product/service company provides:

Technical/Trade Qualifications, Certification or Special Equipment

Identify previous contract opportunities below:

Name of Contractor	Address	Telephone	Contract Amount	Product/Services

Please list below the type (s) of certification (s) the business is currently certified.

1.	2.
3.	4.
5.	6.
Attach a copy of current certificate (s) or letter (s) of certification	

SELF CERTIFICATION ELIGIBILITY REQUIREMENTS

For the purpose of the City of Cincinnati's Small Business Enterprise Program Self Certification Application, a small business concern is a business that is independently owned, controlled and operated and provides a commercially useful function as defined in the City Municipal Code (CMC) 323-1-I and which meets the definitions or size standard established by CMC 323-1-S and the Administrator of the Small Business Administration (SBA) program.

The size standards are expressed either in number of employees or annual receipts in millions of dollars (based on a three year average), unless otherwise specified. The number of employees or annual receipts indicates the maximum allowed for a business concern inclusive of any affiliates as defined by 13 C.C.R. 121.201. Please refer to www.sba.gov. Or contact the Small Business Enterprise Self Certification office for the relevant primary North American Industry Classification Systems (NAICS) Codes and size standards information. Please enter the NAICS code(s) that represent your company service below.

This area must be completed for application review. Please do not leave any areas blank.

(Initial above) The NAICS/SIC code(s) for this business is

(Initial above) Average 3-year Annual Receipts

(Initial above) Average 3-year Number of Employees

(Initial above) My Bonding Range? (If applicable)

(Initial above) List Personal Net Worth of each Owner

1. 2. 3. 4.

Self-Certification Oath and Affirmation (Signature must be witnessed by a notarized by a Notary Public)

As the principle owner and contractor completing this application, I attest to the fact that the bidding associated with this application will not exceed \$50,000 during the life of the contract. I will not present *Change Orders* to increase the total value of the contract to exceed \$50,000. If the amount exceeds \$50,000, I understand that I could encounter penalty up to and including debarment. I affirm under penalty of perjury that the foregoing is true and accurate to the best of my knowledge and belief.

Signature of Principal

Title

Date

Printed Name

Subscribed and duly sworn in my presence this _____ day of _____ 20__.

County of _____ State of _____

SS

(Notary Public (signature))

My commission expires: _____

*If you have not completed a Purchasing Vendor Registration Form, please call 352-3209 or download www.cincinnati-oh.gov

*In order to verify any affirmations made the City of Cincinnati reserves the right to request additional information.